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Bib Data Sheet

CONFIRMATION NO. 1585

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|---|---|-------------------------------|---|--|--------------------------------|
| SERIAL NUMBER 09/989,814 | FILING DATE 11/20/2001 RULE | CLASS 709 715 | GROUP ART UNIT 2151 2178 | ATTORNEY DOCKET NO. VIGN1410 | |
| APPLICANTS Robin D. Wilson, Buda, TX; Dennis C. Heideman, Buda, TX; Daniel Yee, Austin, TX; Robert Scott Dickerson, Austin, TX; | | | | | |
| ** CONTINUING DATA ***** NONE CBP | | | | | |
| ** FOREIGN APPLICATIONS ***** NONE CBP | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/04/2001 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after mat <input type="checkbox"/> Allwance Verified and <u>U. S. B. R. R. C. C. B. P.</u> Acknowledged Examiner's Signature Initials | | STATE OR COUNTRY TX | SHEETS DRAWING 8 | TOTAL CLAIMS 29 | INDEPENDENT CLAIMS 4 |
| ADDRESS 25094 | | | | | |
| TITLE Hierarchical asset sharing model | | | | | |
| FILING FEE RECEIVED 986 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |